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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

None JG

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

None JG

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* SMALL ENTITY \*\*

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 4	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials			

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## TITLE

Lap top tray

FILING FEE  RECEIVED 393	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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